

SCC eFile
(6/10)

**2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

212501341

1.) CORPORATION NAME:

**Southwest Virginia Chapter, The Institute of Internal
Auditors, Inc.**

DUE DATE: **2/29/2012**

SCC ID NO: **03534989**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY
MICHAEL B MASSEY
8166 ROANOKE RD
PO BOX 529**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

FINCASTLE, VA 24090

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

BOTETOURT COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 529

CITY/ST/ZIP: FINCASTLE, VA 24090-

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

☒

OFFICER

☒

DIRECTOR

NAME: ELISABETH BOWLER
TITLE: PRESIDENT
ADDRESS: 213 S JEFFERSON ST
STE 701
CITY/ST/ZIP/CO: ROANOKE, VA 24011-

☒

OFFICER

☒

DIRECTOR

NAME: CATHERINE SWAIN
TITLE: VICE PRESIDENT
ADDRESS: 110 FRANKLIN RD
CITY/ST/ZIP/CO: ROANOKE, VA 24042-

☒

OFFICER

☒

DIRECTOR

NAME: CARLTON COURTNEY
TITLE: TREASURER
ADDRESS: 213 S JEFFERSON ST STE 701
CITY/ST/ZIP/CO: ROANOKE, VA 24011-

☒

OFFICER

☒

DIRECTOR

NAME: AMANDA BURTON
TITLE: SECRETARY
ADDRESS: 110 FRANKLIN RD
CITY/ST/ZIP/CO: ROANOKE, VA 24042-

☐

OFFICER

☒

DIRECTOR

NAME: LISA ALLNUTT
TITLE: DIRECTOR
ADDRESS: 213 S JEFFERSON ST STE 701
CITY/ST/ZIP/CO: ROANOKE, VA 24011-

NAME:	TOM BELT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5008 AIRPORT RD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24012-		
NAME:	NANCY BARR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	213 S JEFFERSON ST STE 701		
CITY/ST/ZIP/CO:	ROANOKE, VA 24011-		
NAME:	KAREN BENNETT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Webmstr Chair		
ADDRESS:	5008 AIRPORT RD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24012-		
NAME:	DENISE STEWART	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5008 AIRPORT RD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24012-		
NAME:	LISA HOLLANDSWORTH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	110 FRANKLIN RD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24042-		
NAME:	MARY POTTER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	213 S JEFFERSON ST STE 701		
CITY/ST/ZIP/CO:	ROANOKE, VA 24011-		
NAME:	CHERYL RAMSEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Mbrshp Chair		
ADDRESS:	213 S JEFFERSON ST STE 701		
CITY/ST/ZIP/CO:	ROANOKE, VA 24011-		
NAME:	JERRY DILEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	85 ST CHARLES PLACE		
CITY/ST/ZIP/CO:	MONETA, VA 24121-		
NAME:	GLENN LINDSAY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5613 CAVALIER DRIVE SW		
CITY/ST/ZIP/CO:	ROANOKE, VA 24018-		
NAME:	PAUL ZAVOLTA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 2345		
CITY/ST/ZIP/CO:	ABINGDON, VA 24212-		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			

<u>/s/ CARLTON COURTNEY</u>	<u>CARLTON COURTNEY,</u>	<u>1/2/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>TREASURER</u> PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		